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Bib Data Sheet

CONFIRMATION NO. 8345

SERIAL NUMBER 10/646,343	FILING DATE 08/22/2003 RULE	CLASS 118	GROUP ART UNIT 1734	ATTORNEY DOCKET NO. 4001798.0002
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APPLICANTS

R. Bruce DeMent, Lemont, IL;
 Paul L. Werstler, Evergreen Park, IL;

** CONTINUING DATA ***** *None*

** FOREIGN APPLICATIONS ***** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 11/14/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Ym</i>	STATE OR COUNTRY IL	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
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EXAMINER'S SIGNATURE: *Ym* INITIALS: *Ym*

ADDRESS

Milton S. Gerstein
 Much Shelist Freed
 Suite 1800
 191 N. Wacker Drive
 Chicago, IL
 60606

TITLE

Nozzle for use in rotational casting apparatus

FILING FEE RECEIVED 493	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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